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**AUTHORIZED UTILITY REPRESENTATIVE FORM FOR TELECOMMUNICATIONS CARRIERS**

TYPE:    ☐ IXC            ☐ CLEC            ☒ ILEC            ☐ Wireless

**CERTIFICATED COMPANY INFORMATION**

St. Stephen Telephone Company \_\_\_\_\_  
 Company Name \_\_\_\_\_ FEIN/SSN \_\_\_\_\_  
 TDS Telecom \_\_\_\_\_ 865 671-4749 \_\_\_\_\_  
 Dbaf/ka \_\_\_\_\_ Telephone # \_\_\_\_\_  
 10025 Investment Drive, Suite 200 \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 Knoxville, TN 37932 \_\_\_\_\_  
 City, State, Zip Code \_\_\_\_\_  
 Town of St. Stephen \_\_\_\_\_  
 Business Location \_\_\_\_\_  
 \_\_\_\_\_  
 City, State, Zip Code \_\_\_\_\_ County \_\_\_\_\_

**REGISTERED AGENT INFORMATION**

Registered Agent: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 City, State, Zip Code: \_\_\_\_\_

Pursuant to the Commission's rules and regulations, print or type company contact for the following areas:

A.            N/A  
**General Manager** (Include address if different than above.)  
 \_\_\_\_\_  
 Telephone Number                      Facsimile Number                      E-mail Address

B.            \_\_\_\_\_  
**Customer Relations /Complaints Representative** (Include address if different than above.)  
 \_\_\_\_\_ /TDS Telecom Complaints <tdstelecomcomplaints@tdstelecom.com>  
 Telephone Number                      Facsimile Number                      E-mail Address

C1.            James Meade  
**Customer Relations/Complaints Representative for Escalated Complaints** (Include address if different than above.)  
 \_\_\_\_\_ / \_\_\_\_\_ jim.meade@tdstelecom.com  
 Telephone Number                      Facsimile Number                      E-mail Address

C2.            \_\_\_\_\_  
**Customer Contact (Toll Free Number)**

D.            James Meade  
**Engineering Operations** (Include address if different than above.)  
 \_\_\_\_\_ / \_\_\_\_\_  
 Telephone Number                      Facsimile Number                      E-mail Address

E.            James Meade  
**Test and Repair** (Include address if different than above.)  
 \_\_\_\_\_ / \_\_\_\_\_

**RECEIVED**  
 FEB 11 2013  
 PSC SC  
 MAIL / DMS

Telephone Number                      Facsimile Number                      E-mail Address

F. James Meade  
**Emergencies** (During non-office hours)  
865 679 9667                      /                      /  
Telephone Number                      Facsimile Number                      E-mail Address

**In addition, please provide the following company contact information to assist in proper routing of correspondence and invoices:**

G. James C Meade  
**Regulatory Officer** (Include address if different than above.)  
865 671-4749                      /                      865 966-4720                      /                      jim.meade@tdstelecom.com  
Telephone Number                      Facsimile Number                      E-mail Address

H. TDS Telecom -Tax Knowledge Center  
**Dual Party Mailings** (Name)  
525 Junction Road Madison, WI 53717  
Mailing Address  
865 671 4749                      /                      608 664-8887                      /                      taxknowledgectr@teldta.com  
Telephone Number                      Facsimile Number                      E-mail Address

I. Mailings to James Meade Checks to: TDS Telecom- St. Stephen USRJCM Attn: Scanning PO Box 480 Monroe, WI 53566  
**Interim LEC Fund Mailings** (Name)  
Invoices to: TDS Telecom- St. Stephen USRJCM PO Box 620988 / Middleton, WI 53562-0988  
Mailing Address  
865 671 4749                      /                      865 966 4720                      /                      jim.meade@tdstelecom.com  
Telephone Number                      Facsimile Number                      E-mail Address

J. Mailings to James Meade Checks to: TDS Telecom- St. Stephen USRJCM Attn: Scanning PO Box 480 Monroe, WI 53566  
**Universal Service Fund Mailings** (Name)  
Invoices to: TDS Telecom- St. Stephen USRJCM PO Box 620988 / Middleton, WI 53562-0988  
Mailing Address  
865 671 4749                      /                      865 966 4720                      /                      jim.meade@tdstelecom.com  
Telephone Number                      Facsimile Number                      E-mail Address

K. Finance  
**Gross Receipts Mailings** (Name)  
24 Depot Square, Unit 2 Northfield, VT 05663  
Mailing Address  
865 671 4749                      /                      865 966 4720                      /                      finance@tdstelecom.com  
Telephone Number                      Facsimile Number                      E-mail Address

L. James Meade New Applicant may be sent directly to the e-mail listed below  
**Lifeline Mailings** (Name)  
Mailing Address  
/                      /                      Lifeline Approvals <lifelineapprovals@tdstelecom.com>  
Telephone Number                      Facsimile Number                      E-mail Address

James Meade  
This form was completed by (print name)                      Signature  
Manager State Government Affairs                      12/13/12  
Title                      Date

RETURN COMPLETED FORM TO:

Public Service Commission of SC  
**Docking Department**  
Post Office Drawer 11649  
Columbia, South Carolina 29211

Office of Regulatory Staff  
**Attn: Jeanne Gordon**  
1401 Main Street, Suite 900  
Columbia, South Carolina 29201

(Rev. PSC/ORS 08)